

**To be used for changes to registrations and terminations.**

**FOR OFFICE USE ONLY**

Postmark Date: 06/01/05

USUPP

1050574

- J. NAME Harkins Deborah D.  
Last First MI

2. BUSINESS PHONE (504) 586-1200

3. BUSINESS ADDRESS 643 Magazine Street New Orleans LA 70130  
Street and No. City State Zip

MAILING ADDRESS Same \_\_\_\_\_  
Street and No. City State Zip

4. EMPLOYER McGlinchey Stafford, PLLC

5. EMPLOYER'S ADDRESS Same  
Street and No. City State Zip

6. Have you ceased or terminated all lobbying activities requiring registration? Yes \_\_\_\_\_ No X

7. LIST BELOW (a) Names of persons, groups, or organizations which you are adding or eliminating; (b) the address of each such person, group, or organization listed; (c) the type of business each is engaged in or the purpose or function of the organization or group; (d) whether or not the client or someone else pays you to lobby; and (e) the date of termination if applicable.

1 Name **Mothe Life Insurance Company** \_\_\_\_\_

Address P.O. Box 2128, Gretna, Louisiana 70054

Business or purpose Insurance Company

☒ New Representation  
Does this person pay you? No

If No, who pays you? McGlinchey Stafford, PLLC

☐ Terminated Representation as of \_\_\_\_\_

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COMMERCIAL BANK  
JAN 10 1964

**SUPPLEMENTAL REGISTRATION FORM**




2. Name American Diabetes Association  
Address 2499 So. Capital of Texas Highway, Suite A-105, Austin, Texas 78746  
Business or purpose Health Association  
☒ New Representation  
Does this person pay you? No  
If No, who pays you? McGlinchey Stafford  
☐ Terminated Representation as of \_\_\_\_\_

3. Name \_\_\_\_\_  
Address \_\_\_\_\_  
Business or purpose \_\_\_\_\_  
☐ New Representation  
Does this person pay you? \_\_\_\_\_  
If No, who pays you? \_\_\_\_\_  
☐ Terminated Representation as of \_\_\_\_\_

**CERTIFICATION OF ACCURACY**

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief; and that no information required by the Lobbyist Disclosure Act [LSA-R.S. 24:50 et seq.] has been deliberately omitted.

  
\_\_\_\_\_  
Signature of Lobbyist